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CONFIRMATION NO. 5083

| SERIAL NUMBER | FILING or 371(c) DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. | | |
|---|---|--|-----------------------------------|---|------------------------------|------------------------------------|
| 10/828,793 | 04/20/2004 RULE | 702 | 1631 | HEWAYS.015A6D1 | | |
| APPLICANTS Edwin C. Iliff, La Jolla, CA; ** CONTINUING DATA ***** This application is a DIV of 09/785,044 02/14/2001 which claims benefit of 60/182,176 02/14/2000 ** FOREIGN APPLICATIONS ***** ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 06/26/2004 | | | | | | |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged /SHUBO ZHOU/ Examiner's Signature | | <input type="checkbox"/> Met after Allowance Initials | STATE OR COUNTRY CA | SHEETS DRAWINGS 37 | TOTAL CLAIMS 9 | INDEPENDENT CLAIMS 3 |
| ADDRESS SUITER SWANTZ PC LLO 14301 FNB PARKWAY SUITE 220 OMAHA, NE 68154 UNITED STATES | | | | | | |
| TITLE Automated diagnostic system and method | | | | | | |
| FILING FEE RECEIVED 1415 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |